



Arizona Department of Water Resources
Water Management Support Section
P.O. Box 33589 Phoenix, Arizona 85067-3589
(602) 771-8500 • (800) 352-8488
www.azwater.gov

Request to Change Well Information

- ❖ Review instructions prior to completing form in black or blue ink.
 - ❖ You must include with your Notice:
 - check or money order for any required fee(s)
 - ❖ Authority for fee: A.A.C. R12-15-151(B)(4)(a), A.R.S. § 45-113(B)
- ** PLEASE PRINT CLEARLY ****

FILE NUMBER

WELL REGISTRATION NUMBER

55 - 549152

Well Owner		Location of Well					
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Curis Resources (Arizona) Ltd.		WELL LOCATION ADDRESS (IF ANY)					
MAILING ADDRESS 1575 West Hunt Highway		TOWNSHIP (N/S) 4S	RANGE (E/W) 9E	SECTION 28	160 ACRE NW ¼	40 ACRE SE ¼	10 ACRE SW ¼
CITY / STATE / ZIP CODE Florence, AZ 85132		LATITUDE			LONGITUDE		
CONTACT PERSON NAME AND TITLE		Degrees	Minutes	Seconds	°N	Minutes	Seconds
TELEPHONE NUMBER		METHOD OF LATITUDE/LONGITUDE (CHECK ONE)			°W		
FAX		<input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Conventional Survey			<input type="checkbox"/> *GPS: Hand-Held		
		<input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):			<input type="checkbox"/> *GPS: Survey-Grade		
		COUNTY ASSESSOR'S PARCEL ID NUMBER			COUNTY WHERE WELL IS LOCATED		
		BOOK	MAP	PARCEL			

Type of Request (CHECK ONE)

☐ Change of Well Drilling Contractor (Fill out Section 2) ☒ Change of Well Ownership (Fill out Section 3) ☐ Change of Well Information (location, use, etc.) (Fill out Section 4)

\$10 FEE

- ♦ If drilling or abandoning a well, the Department must receive this request and issue authorization to the new drilling firm prior to the commencement of well drilling or abandonment.

Current Well Drilling Contractor		New Well Drilling Contractor	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	
DWR LICENSE NUMBER		DWR LICENSE NUMBER	ROC LICENSE CATEGORY
TELEPHONE NUMBER		TELEPHONE NUMBER	FAX
FAX			

\$10 FEE

- ♦ If this change pertains to more than one well and the names are the same, only one \$10 fee is required.

Previous Well Owner		New Well Owner	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Florence Copper Inc.		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Curis Resources (Arizona) Ltd.	
MAILING ADDRESS 975 Johnson Ferry Road Suite 450		MAILING ADDRESS 1575 West Hunt Highway	
CITY / STATE / ZIP CODE Atlanta, GA 30342		CITY / STATE / ZIP CODE Florence, AZ 85132	
CONTACT PERSON NAME AND TITLE		CONTACT PERSON NAME AND TITLE	
TELEPHONE NUMBER (404) 495-9577		TELEPHONE NUMBER	FAX
FAX			

NO FEE

NOTE: Applies only to wells that have already been drilled. For proposed wells, an amended Notice of Intent to Drill a Well must be filed.

EXPLAIN

Common Well Name P19.2-O

- ☐ By checking this box, I hereby provide ADWR permission to enter the property for the purpose of taking water level measurements at this well. (See instructions.)

I HEREBY CERTIFY that the above statements are true to the best of my knowledge and belief.

TYPE OR PRINT NAME AND TITLE

Michael McPhie, Director

SIGNATURE OF WELL OWNER

[Signature]

5/17/10

DATE

Printed: 5/20/2010 10:38:36 AM

Arizona Department of Water Resources

3550 N Central Ave.
Phoenix AZ 85012

Customer:

U1 RESOURCES INC.
14605 E. HUNT HWY.
FLORENCE, AZ 85132

Receipt #: 10-12513
Office: BOOKSTORE
Receipt Date: 5/20/2010
Sale Type: IN PERSC
Cashier: WRACL

Item No.	Index	AOBJ	Description	Ref ID	Qty	Unit Price	Ext Price
100	15238	4439-22	CHANGE OF WELL INFORMATON FORM AMA 55-71A		1	10.00	10.00
RECEIPT TOTAL:							10.00

Payment type: CHECK

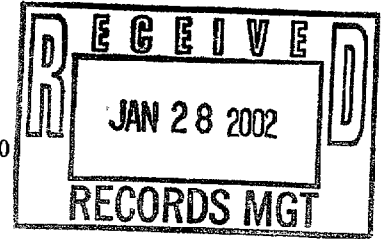
Amount Paid: \$10.00

Payment Received Date: 5/18/2010

Notes: 1 \$10 CHECK RECEIVED FOR 106 - CHANGE OF WELL INFORMATION FORMS. PREVIOUS OWNER -
FLORENCE COPPER INC., TO CURRENT OWNER - CURIS RESOURCES(ARIZONA) LTD

Check # US20011

ARIZONA DEPARTMENT OF WATER RESOURCES
GROUNDWATER MANAGEMENT SUPPORT SECTION
MAIL TO: P.O. BOX 458 - PHOENIX, ARIZONA 85001-0458
FOR INFORMATION: CALL MONICA ORTIZ AT (602) 417-2470



FORM TO CHANGE WELL INFORMATION
OWNERSHIP * DRILLER

Please complete the appropriate section of this request form and return to P.O. Box 458, Phoenix, Arizona 85001-0458 or hand deliver to the address above with applicable fee. **NOTE:** A.R.S. §45-593.C requires that the Department be notified of change of well ownership and that the new owner is required to keep the Department's Well Registration records current and accurate. Well data and ownership changes must be submitted within thirty days after changes take place.

SAVE THIS FORM TO REPORT FUTURE CHANGES IN OWNERSHIP, CHANGES IN ADDRESS, OR CHANGE IN WELL DATA SUCH AS PUMP CAPACITY, CORRECTION OF LEGAL DESCRIPTION, CHANGE OF WELL DRILLER AND AMENDING INFORMATION PREVIOUSLY FILED.

1. CHANGE OF WELL INFORMATION: (NO FEE REQUIRED)

NOTE: If the location of the proposed well changes after drilling authority has been issued, attach a \$10.00 reissue fee for each well.

WELL REGISTRATION NO. 55- _____ FILE NO: _____

If know, I/We request the following well information be changed: _____

Date _____ Signature of Current Well Owner _____

2. STATEMENT OF WELL OWNERSHIP: (\$10.00 FEE REQUIRED)

NOTE: If this change consists of more than one well and the names are common; attach a \$10.00 fee. Otherwise, each well requires a separate fee of \$10.00.

I, BHP Copper Inc., state that I am the Previous/New Owner of the well described below:

SW $\frac{1}{4}$ SE $\frac{1}{4}$ NW $\frac{1}{4}$ of Section 28 Township 4 South Range 9 East
10 Acre 40 Acre 160 Acre

Assessor's tax parcel number of the parcel on which the well is located: Book _____ Map _____ Parcel _____ - _____

Well Registration No. 55- 549152 File No. _____ (if known)

BHP Copper Inc.

Florence Copper Inc.

PRINT Previous Owner's Name

PRINT New Owner's Name

7400 N. Oracle Road, Suite 131

975 Johnson Ferry Road, Suite 450

Mailing Address

Mailing Address

Tucson AZ 85704

Atlanta GA 30342

City State Zip

City State Zip

520-575-5675

404-495-9577

Telephone Number

Telephone Number

Attn: Merrill Mining, L.L.C.

Signature of Previous/New Well Owner:

By: [Signature]

Date

12/5/01

Its: [Signature]

ANSWERED MAY 17 2002

**ARIZONA DEPARTMENT OF WATER RESOURCES
GROUNDWATER MANAGEMENT SUPPORT SECTION
MAIL TO: P.O. BOX 458 - PHOENIX, ARIZONA 85001-0458
FOR INFORMATION: CALL MONICA ORTIZ AT (602) 417-2470**

3. REQUEST TO CHANGE WELL DRILLER \$10.00 FEE REQUIRED FOR EACH WELL

This request must be received by this Department and the Drill Card issued to the new drilling firm prior to the drilling or completion of the well listed below.

Well Registration No. 55- _____ FILE NO. _____

Original Well Driller

New Well Driller

Mailing Address

Mailing Address

City State Zip

City State Zip

Telephone Number

Telephone Number

ADWR License Number

ADWR License Number ROC License Category

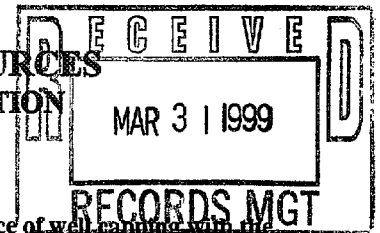
Typed or Printed Name of Well Owner

Signature of Well Owner Date

The fee charge for well ownership and reissue of drill card is authorized by R12-15-151, effective June 30, 1994.

P19.2-0

ARIZONA DEPARTMENT OF WATER RESOURCES
GROUNDWATER MANAGEMENT SUPPORT SECTION
 P O BOX 458, PHOENIX, ARIZONA 85001-0458
 PHONE: (602) 417-2470



Arizona Revised Statute §45-594 and A.A.C. R12-822: The owner of an open well shall file a notice of well capping with the Department in writing no later than five days after the well is capped.

NOTICE OF WELL CAPPING

1. LEGAL DESCRIPTION OF THE LOCATION OF WELL:

a. Township 45
 b. Range 9E
 c. Section 28
SW $\frac{1}{4}$ SE $\frac{1}{4}$ nw $\frac{1}{4}$
 10 Acre 40 Acre 160 Acre

2. WELL REGISTRATION NUMBER:

55- 549152

File No: D(49)28 bdc

3. OWNER OF THE WELL:

BHP Copper
 Name
14005 East Hunt Hwy
 Address
Florence AZ 85232
 City State Zip
(520) 868-5090
 Telephone Number

4. PERSON INSTALLING THE CAP:

Richard Sichling
 Name
14005 East Hunt Hwy
 Address
Florence AZ 85232
 City State Zip
(520) 868-5011
 Telephone Number

5. DATE WELL WAS CAPPED:

1996

6. METHOD OF CAPPING:

① watertight well
cap ② Vault with
locking cap

7. TYPE AND DIAMETER OF CASING:

Type of Well Casing: sch 80
PVC
 Diameter of Well Casing: 6 5/8"

8. COMMENTS

I state that this Notice is filed in compliance with A.R.S. §45-594 and A.A.C. R12-15-822, and is complete and correct to the best of my knowledge and belief.

9. Signature

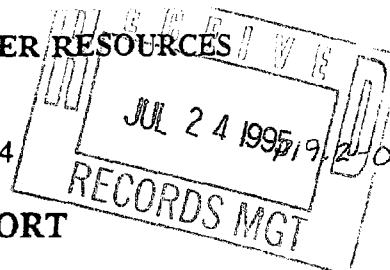
Willa Hoag

Date

3/30/99

ARIZONA DEPARTMENT OF WATER RESOURCES

Operations Division
500 North 3rd Street
Phoenix, Arizona 85004



WELL DRILLER REPORT

This report should be prepared by the driller in all detail and filed with the Department within 30 days following completion of the well.

1. Owner Name: MAGNA COPPER COMPANY
Address: 14605 WEST HUNT HIGHWAY FLORENCE AZ 85232
Street City State Zip
2. Driller Name: ARIZONA BEAMAN DRILLING LLC
Address: P.O. Box 3370 APACHE JUNCTION AZ 85217
Street City State Zip
3. Location: 4 N15 9 E/W 28 $\frac{1}{4}$ SW $\frac{1}{4}$ SE $\frac{1}{4}$ NW
Township Range Section 10-acre 40-acre 160-acre
4. Well Registration No. 55- 549152 (Required)
5. Permit No. 59-549028 (If issued)

DESCRIPTION OF WELL

6. Total depth of hole 630 ft.
7. Type of casing Sch. 80 PVC
8. Diameter and length of casing 6 7/8 in. from -1.5 to 622.3 in from _____ to _____
9. Method of sealing at reduction points _____
10. Perforated from _____ to _____ from _____ to _____ from _____ to _____
11. Size of cuts _____ Number of cuts per foot _____
12. If screen was installed: Length 197.5 ft. Diam 6 7/8 in. Type 0.080" slot, Sch. 80 PVC
13. Method of construction Drilled
(drilled, dug, driven, bored, jetted, etc)
14. Date started JUNE 7 1995
Month Day Year
15. Date completed JUNE 8 1995
Month Day Year
16. Depth to water 157 ft. (If flowing well, so state)
17. Describe point from which depth measurements were made, and give sea-level elevation if available
top of casing
18. If flowing well, state method of flow regulation: _____
19. Remarks: _____

DO NOT WRITE IN THIS SPACE
OFFICE RECORD

Registration No. _____
File No. _____
Received _____ By _____
Entered _____ By _____

LOG OF WELL

Indicate depth at which water was first encountered, and the depth and thickness of water bearing beds. If well is artesian, indicate depth at which encountered, and depth to which it rose in well.

[illegible]

I hereby certify that this well was drilled by me (or under my supervision), and that each and all statements herein contained are true to the best of my knowledge and belief.

Driller Name: Az Beeman Drilling LLC
P.O. Box 3870
 Street Apache Junction Az 85217 983-7542
 City State Zip Phone No.
July 18, 1995
 Date

ARIZONA DEPARTMENT OF WATER RESOURCES

OPERATIONS DIVISION

500 North Third Street
Phoenix, Arizona 85004-3903
Phone (602) 417-2470

REISSUE

THIS AUTHORIZATION SHALL BE IN POSSESSION OF THE DRILLER DURING ALL DRILL OPERATIONS

WELL REGISTRATION NO. 55-549148 THRU 55-549152

AUTHORIZED DRILLER: ARIZONA BEEMAN DRILLING

LICENSE NO. 360

NOTICE OF INTENTION TO DRILL A MONITOR WELL HAS BEEN FILED WITH THE DEPARTMENT BY:

Owner of Well(s)

MAGMA COPPER COMPANY

14605 WEST HUNT HIGHWAY

FLORENCE

AZ 85232

The well(s) is/are to be located in:

SW 1/4 SE 1/4 NW 1/4
10 acrs 40 acrs 160 acrs

Section 28

Township

4.0 SOUTH

Range

9.0 EAST

NUMBER OF WELLS IN PROJECT: 5

THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON MAR 30TH, 1998

THE DRILLER SHALL FILE A LOG OF THE WELL WITHIN 30 DAYS OF
COMPLETION OF DRILLING.



CHIEF, OPERATIONS DIVISION

Nov. 05 1996 04:56PM P2

PHONE NO. : 983 4816

FROM : BEEMAN
SENT BY :